

DEC. 12, 2005 4:22PM  
TO: USPTO

ZILKA-KOTAB, PC

NO. 1284 P. 1

**ZILKA-KOTAB**  
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**FAX COVER SHEET**

Date:	December 12, 2005	Phone Number	Fax Number
To:	(571) 273-8300		
From:	Kevin J. Zilka		

Docket No.: NAI1P318/01.240.01

**App. No: 10/092,179**

Total Number of Pages Being Transmitted, Including Cover Sheet: 13

**Message:**

Please deliver to Examiner Dada.

~~Thank you,~~

~~Kevin J. Zilka~~

*Original to follow Via Regular Mail*  *Original will Not be Sent*  *Original will follow Via Overnight Courier*

\*\*\*\*\*  
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AT (408) 971-2573 AT YOUR EARLIEST CONVENIENCE

December 11, 2005

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: )  
 )  
 Wu et al. ) Art Unit: 2135  
 )  
 Application No. 10/092,179 ) Examiner: Dada, Beemnent W.  
 )  
 Filed: March 5, 2002 ) Date: December 12, 2005  
 )  
 For: SIGNATURE BASED NETWORK )  
 INTRUSION DETECTION )  
 )  
 )

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DEC 12 2005

**CERTIFICATE OF FACSIMILE**  
 I hereby certify that this correspondence is being facsimile transmitted to the Commissioner for  
 Patents, Alexandria, VA 22313-1450 at facsimile number: (571) 273-8300 on the above date.

Signed:

Erica Z. Farlow

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 2233-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	Claims Remaining After Amendment	Highest Previously Paid For	Present Extra	SMALL ENTITY RATE FEE	OR	LARGE ENTITY RATE FEE
<b>TOTAL CLAIMS</b>	<u>35</u>	<u>30</u>	<u>05</u>	X25 = \$	OR	X50 = \$250
<b>INDEP CLAIMS</b>	<u>03</u>	<u>03</u>	<u>00</u>	X100 = \$	OR	X200 = \$
[ ] Multiple Dependent Claim Present and Fee Not Previously Paid				\$0		\$0
				<b>TOTAL</b>	\$	<b>\$250.00</b>

  


Applicant(s) hereby petition for a month extension of time to respond to the outstanding Office Action.  
 Applicant(s) believe that no Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-1351.  
  

 Enclosed is our Check No. in the amount of \$ to cover the additional claim fee and/or extension of time fees.  
 If the required fees are missing or any additional fees are required to facilitate filing the enclosed response, please charge such fees or credit any overpayment to Deposit Account No. 50-1351 (Order No. NAI1P318).  
 A copy of this sheet is enclosed for billing purposes.

Respectfully submitted,  
 Zilka-Kotab, PC

Kevin J. Zilka  
 Registration No. 41,429

P.O. Box 721120  
 San Jose, CA 95172-1120  
 Telephone: (408) 971-2573

(Revised 1/96)

PATENT

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Wu et al.

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Filed: March 5, 2002

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<b>CLAIMS</b>						
<b>INDEP</b>						
<b>CLAIMS</b>	<b>03</b>	<b>03</b>	<b>.00</b>	<b>X100 = \$</b>	<b>OR</b>	<b>X200 = \$</b>
[ ] Multiple Dependent Claim Present and Fee Not Previously Paid				<b>\$0</b>		<b>\$0</b>
				<b>TOTAL</b>	<b>\$</b>	<b>\$250.00</b>

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San Jose, CA 95172-1120  
Telephone: (408) 971-2573

(Rev. 1/96)

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